

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

ours per response 16.00						
e burden						
expires: May 31, 2005						
3235-0076						
ROVAL						

SEC USE ONLY							
Prefix Serial							
DA	TE RECEIV	ED					

		L.,
Name of Offering (check if this	is an amendment and name has changed, and in	ndicate change.)
Financial Stocks Limited Partnership		
Filing Under (Check box(es) that apply):	Rule 504 Rule 505 Rule 5	06 Section 4(6) ULOE
Type of Filing: New Filing	Amendment	
	A. BASIC IDENTIFICATION DATA	Α
1. Enter the information requested about the	issuer	
Name of Issuer (check if this is an ar	nendment and name has changed, and indicate	change.)
Financial Stocks Limited Partnership		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
507 Carew Tower, Cincinnati, Ohio 45202	•	(513) 241-6166
Address of Principal Business Operations	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	(1. a.i.o., a.i.a outti, o.i.y, o.i.a., 2.ip o.a.)	
Brief Description of Business		RECEIVED
Investment Partnership		
investment i ai thership		7 7 7 2003
Type of Business Organization		S DROCESSE
☐ corporation	limited partnership, already formed	other (please specify)
business trust	limited partnership, to be formed	ROCESSE Specify PROCESSE JUL 15 2003
	Month Year	
Actual or Estimated Date of Incorporation or O	rganization: $\begin{bmatrix} 0 & 7 & 9 & 5 \end{bmatrix}$	Actual Estimated THOMSON FINANCIAL
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service abbrevia	ation for State: O H
, .	CN for Canada: FN for other foreign jurisdic	() () () ()

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it was received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Memorandum (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

· · · · · · · · · · · · · · · · · · ·											
A. BASIC IDENTIFICATION DATA											
2. Enter the information requested for the following:											
• Each promoter of the issuer, if the issuer has been organized within the past five years;											
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;											
 Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. 											
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner											
Full Name (Last name first, if individual)											
Financial Stocks, Inc.											
Business or Residence Address (Number and Street, City, State, Zip Code)											
507 Carew Tower, Cincinnati, Ohio 45202											
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner											
Full Name (Last name first, if individual)											
Stein, Steven N.											
Business or Residence Address (Number and Street, City, State, Zip Code)											
507 Carew Tower, Cincinnati, Ohio 45202											
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or											
Full Name (Last name first, if individual)											
Stein, John M.											
Business or Residence Address (Number and Street, City, State, Zip Code)											
507 Carew Tower, Cincinnati, Ohio 45202											
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner											
Full Name (Last name first, if individual)											
Schultz, Philip F.											
Business or Residence Address (Number and Street, City, State, Zip Code)											
507 Carew Tower, Cincinnati, Ohio 45202											
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner											
Full Name (Last name first, if individual)											
Croog, Charles F.											
Business or Residence Address (Number and Street, City, State, Zip Code)											
507 Carew Tower, Cincinnati, Ohio 45202											
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner											
Full Name (Last name first, if individual)											
Vidinli, Nedret											
Business or Residence Address (Number and Street, City, State, Zip Code)											
507 Carew Tower, Cincinnati, Ohio 45202											

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Penote, John J.	,				
Business or Residence Address	s (Number and Stree	et, City, State, Zip Code)			
507 Carew Tower, Cincinn	•	, , , , , ,			
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or
					Managing Partner
Full Name (Last name first, if	individual)				
Warm, Alexander D.					
Business or Residence Address	s (Number and Stree	et, City, State, Zip Code)			
507 Carew Tower, Cincinna	ati, Ohio 45202				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or
					Managing Partner
Full Name (Last name first, if	individual)				
Vigran, Stanley					
Business or Residence Address		et, City, State, Zip Code)			
507 Carew Tower, Cincinn	ati, Ohio 45202				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or
Full Name (Last area Got (C)	:				Managing Partner
Full Name (Last name first, if	individual)				
D	(N) 1 Ch	4 C'+ C++ 7' C-1-)			
Business or Residence Address	s (Number and Stree	et, City, State, Zip Code)			
Cl. I.B. () II. (A. I					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
	,				
Business or Residence Address	(Number and Stree	et. City, State, Zip Code)			
	(,			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or
					Managing Partner
Full Name (Last name first, if i	individual)				
Business or Residence Address	(Number and Stree	t, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
		***************************************			Managing Partner
Full Name (Last name first, if i	ndividual)				
Business or Residence Address	(Number and Stree	t, City, State, Zip Code)			
		- <u> </u>	<u> </u>		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				Managing Lattici
1 on Hame (Last hame 1986, 11 1	ngividuai j				
Business or Residence Address	(Number and Stree	t City State Zin Code)	·		

	•				B.	INFORMA	TION ABO	OUT OFFE	RING					
1	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										Yes	No		
1.	Answer also in Appendix, Column 2, if filing under ULOE.										LJ	\boxtimes		
2.												\$250,	000	
3.	Does t	he offering	g permit join	t ownership	of a single u	nit?						***********	Yes	No ⊠
4.	remun person	eration for or agent over (5) per	solicitation of a broker o	ted for each of purchaser or dealer regis sted are asso	rs in connect stered with t	ion with sale he SEC and/	es of securiti or with a sta	es in the offe ite or states,	ering. If a pe list the name	erson to be l	isted is an as er or dealer.	sociated If more		
Full	Name	(Last nan	ne first, if in	dividual)										
Bus	iness o	r Residenc	ce Address (Number and	d Street, Cit	y, State, Zip	Code)							
— Nan	ne of A	ssociated	Broker or D	ealer		<u> </u>								
State				as Solicited k individual] All S	States
[A	L]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]		ID]
[II	.]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[N	MO]
[M	T]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[]	PA]
[R	I]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[]	PR]
Full	Name	(Last nam	e first, if in	dividual)										
Busi	iness or	r Residend	ce Address (Number and	l Street, Cit	y, State, Zip	Code)							
Nan	ne of A	ssociated	Broker or D	ealer										
State	es in W	hich Pers	on Listed H	as Solicited	or Intends t	o Solicit Pu	chasers							
	(Checl	k "All Sta	tes" or chec	k individual	States)] All S	tates
[A]	L]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[]]	.]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[N	MO]
[M	Γ]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[]	PA]
[R	I]	[SC]	[SD]	[TN]	[XX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[]	PR]_
Full	Name	(Last nam	e first, if in	dividual)		- -								
Busi	ness or	Residence	ee Address (Number and	Street, City	y, State, Zip	Code)							
Nam	ne of A	ssociated	Broker or D	ealer			····							
State	e in W	hich Perc	on Listed U	as Solicited	or Intende t	o Solicit D	chasers							
Sian				as sonened k individual								_	ם אור	totos
[AI		[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	 [HI]	All S L	
		[IN]	[AZ] [IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]		ID] 40]
[M		[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]		/10] PA]
		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]		PR]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	E OF	PROCEE	DS		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	-				
	Type of Security	(Aggregate Offering Pri		Am	ount Alread Sold
	Debt	\$	-0-		\$	-0-
	Equity	\$	-0-		\$	-0-
	☐ Common ☐ Preferred					
	Convertible Securities (including warrants)	\$	-0-		\$	-0-
	Partnership Interests	\$	250,000		\$	250,000
	Other (Specify))	\$_	-0-		\$	-0-
	Total	\$	250,000		\$	250,000
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Number Investors		1)(Aggregate flar Amoe u Purchases
	Accredited Investors		1		\$	250,000
	Non-accredited Investors	_	0		\$	0
	Total (for filings under rule 504 only)		N/A			N/A
	Answer also in Appendix, Column 4, if filing under ULOE.					
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.					
	Turn of officing		Type of		Do	llar Amount
	Type of offering		Security		Φ.	Sold
	Rule 505		N/A	_	\$_	N/A
	Regulation A		N/A		\$	N/A
	Rule 504		N/A	_	\$	N/A
	Total		N/A		\$	N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees				\$	-0-
	Printing and Engraving Costs			\boxtimes	\$	850
	Legal Fees			\boxtimes	\$	2200
	Accounting Fees				\$	-0-
	Engineering Fees				\$	-0-
	Sales Commissions (specify finders' fees separately)				\$	-0-

Other Expenses (identify): Filing Fee

100

	b. Enter the difference between the aggregate offering price given in response to Part C – Question 1 and total expenses furnished in response to Part C – Question 4.a. This difference is the "adjusted gross proceeds to the issuer."			<u>\$ 24</u>	6,850
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part $C-Q$ uestion 4.b above.				
		Of Direc	nents to ficers, ctors, & filiates	-	ments to Others
	Salaries and fees – Annual Administrative Fee.	□ \$	3,750	□ \$_	-0-
	Purchase of real estate	□ \$	-0-	□ \$	-0-
	Purchase, rental or leasing and installation of machinery and equipment	□ \$	-0-	□ \$	-0-
	Construction or leasing of plant buildings and facilities	□ \$	-0-	□ \$_	-0-
	Acquisition of other husinesses (including the value of securities involved in this offering that may be used in exchange for the assets of securities of nother issuer pursuant to a merger)	□ \$	- 0-	□ \$	-0-
	Repayment of indebtedness	□ \$	-0-	□ \$	-0-
	Working capital	□ \$	-0-	□ \$_	-0
	Other (specify): For Investment Purposes	□ \$	-0-	⊠ \$	243,100
	Column Totals	□ \$	3,750	⊠ \$	243,100
			_		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

D.	FE	DE	RA	L S	IG	TAP	URE
----	----	----	----	-----	----	-----	-----

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature) , â	Date
Fiancial Stocks Limited Partnership	la Me	July 9, 2003
Name of Signer (Print or Type)	Title of Signer (Print of Type)	
John M. Stein	President of the General Partner	

ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).